

## PROJECT 1329 RECORD

1. DATE : TIME GROUP 14 December 1968 See summary	2. LOCATION Iowa City, Iowa
3. SOURCE Civilian	10. CONCLUSION Probable (SATELLITE)
4. NUMBER OF OBJECTS One	Description is consistent with that of a satellite.
5. LENGTH OF OBSERVATION 10 Minutes	11. BRIEF SUMMARY AND ANALYSIS The observer sighted a star-like light that moved across the sky and disappeared in about 10 minutes. He indicated on the green 164 that sighting occurred at 6:00 PM but on the AF Form 117 he indicated that it occurred at 8:00PM.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE NE	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input type="checkbox"/> No	

FORM  
FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

13.	DID THE PHENOMENON	YES	NO	UNKNOWN
MOVE IN A STRAIGHT LINE?			✓	
STAND STILL AT ANYTIME?			✓	
SUDDENLY SPEED UP AND RUN AWAY?			✓	
BREAK UP IN PARTS AND EXPLODE?			✓	
CHANGE COLOR?			✓	
GIVE OFF SMOKE?			✓	
CHANGE BRIGHTNESS?			✓	
CHANGE SHAPE?			✓	
FLASH OR FLICKER?			✓	
DISAPPEAR AND REAPPEAR?			✓	
SPIN LIKE A TOP?			✓	
MAKE A NOISE?			✓	
FLUTTER OR WOBBLE?			✓	

## 14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

looking at stars and saw it moving

## A. HOW DID IT FINALLY DISAPPEAR?

Went over horizon

B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?  
 YES    NO. IF "YES," DESCRIBE.

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE?  YES  NO. IF "YES," GIVE DATE AND LOCATION.

23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON?  YES  NO. IF "YES," DID THEY SEE IT TOO?

A. LIST THEIR NAMES AND ADDRESSES

[REDACTED] [REDACTED] [REDACTED]

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME, MIDDLE NAME

[REDACTED]

ADDRESS (Street, City, State and Zip Code)

[REDACTED] 100 Iowa City, Iowa 52240

TELEPHONE (Area code and number)

[REDACTED]

AGE

[REDACTED]

MALE

FEMALE

INDICATE ADDITIONAL INFORMATION INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.

Student

25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?

NAME [REDACTED] DAY 12 MONTH Dec YEAR 1968

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.

DAY 1 MONTH Jan YEAR 1969

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.

<input checked="" type="checkbox"/> EYEGLASSES	CAMERA VIEWER
<input type="checkbox"/> SUNGLASSES	<input checked="" type="checkbox"/> BINOCULARS
<input type="checkbox"/> WINDSHIELD	TELESCOPE
<input type="checkbox"/> SIDE WINDOW OF VEHICLE	THEODOLITE
<input type="checkbox"/> WINDOWPANE	OTHER

A. DO YOU ORDINARILY WEAR GLASSES?  YES  NO

18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED Don't know.

B. DO YOU USE READING GLASSES?  YES  NO

19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE Don't know.

20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.

*look like a star*

21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY?  YES  NO. IF "YES," DESCRIBE.

A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE.  YES  NO.  
IF "YES," DESCRIBE.

27. INFORMATION WHICH YOU FEEL IS PERTINENT BUT WHICH IS NOT ADEQUATELY COVERED IN THIS QUESTIONNAIRE,  
ALTERNATIVELY PROVIDE A NARRATIVE EXPLANATION OF THE SIGHTING.

look like a star

# OFFICIAL U.S. AIR

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## U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

12/14/68   December 1968

Day

Month

Year

2. Time of day: 6 0

Hours

Minutes

(Circle One):

A.M.

or

P.M.

3. Time Zone:

(Circle One):  
a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One):  
a. Daylight Saving  
b. Standard

4. Where were you when you saw the object?

At home Drive

Nearest Postal Address

City or Town

State or County

5. How long was object in sight? (Total Duration)

0 10 0

Hours

Minutes

Seconds

a. Certain  
b. Fairly certain

c. Not very sure  
d. Just a guess

5.1 How was time in sight determined?

saw with naked eye and checked clock

5.2 Was object in sight continuously?

Yes  No \_\_\_\_\_

6. What was the condition of the sky?

DAY  
a. Bright  
b. Cloudy

NIGHT  
a. Bright  
b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One):  
a. In front of you  
b. In back of you  
c. To your right

d. To your left  
e. Overhead  
f. Don't remember

# FORCE UFO FORM

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**8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?**

**8.1 STARS (Circle One):**

- a. None
- b. **A few**
- c. Many
- d. Don't remember

**8.2 MOON (Circle One):**

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight—pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

**CLOUDS (Circle One):**

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

**WEATHER (Circle One):**

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

color

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

### 11.1 Compare brightness to some common object:

## Vega, Deneb, and Altair

12. The edges of the object were:

(Circle One): a. Fuzzy or blurred  
b. Like a bright star  
c. Sharply outlined  
d. Don't remember

e. Other Rounded

13. Did the object:

(Circle One for each question)

- a. Appear to stand still at any time?
- b. Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flash or flicker?
- h. Disappear and reappear?

# UFO form continued

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20. Do you think you can estimate the speed of the object?

(Circle One) Yes  No

IF you answered YES, then what speed would you estimate? \_\_\_\_\_

21. Do you think you can estimate how far away from you the object was?

(Circle One) Yes  No

IF you answered YES, then how far away would you say it was? \_\_\_\_\_

22. Where were you located when you saw the object?

(Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane (type)
- e. At sea
- f. Other \_\_\_\_\_

23. Were you (Circle One)

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other In the open

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- a. North
- b. Northeast
- c. East
- d. Southeast
- e. South
- f. Southwest
- g. West
- h. Northwest

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) Yes  No

25. Did you observe the object through any of the following?

a. Eyeglasses	<input checked="" type="radio"/> Yes	No	e. Binoculars	<input checked="" type="radio"/> Yes	No
b. Sun glasses	<input checked="" type="radio"/> Yes	No	f. Telescope	<input checked="" type="radio"/> Yes	No
c. Windshield	<input checked="" type="radio"/> Yes	No	g. Theodolite	<input checked="" type="radio"/> Yes	No
d. Window glass	<input checked="" type="radio"/> Yes	No	h. Other _____		

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

*Star*

# Official U.S. Air Force

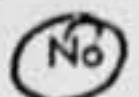
Page 3

14. Did the object disappear while you were watching it? If so, how?

No

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):



Don't know.

IF you answered YES, then tell what

it moved behind:

---

---

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes



Don't know.

IF you answered YES, then tell what

in front of:

---

---

17. Tell in a few words the following things about the object:

a. Sound

none

b. Color

Bright white

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

Didn't do

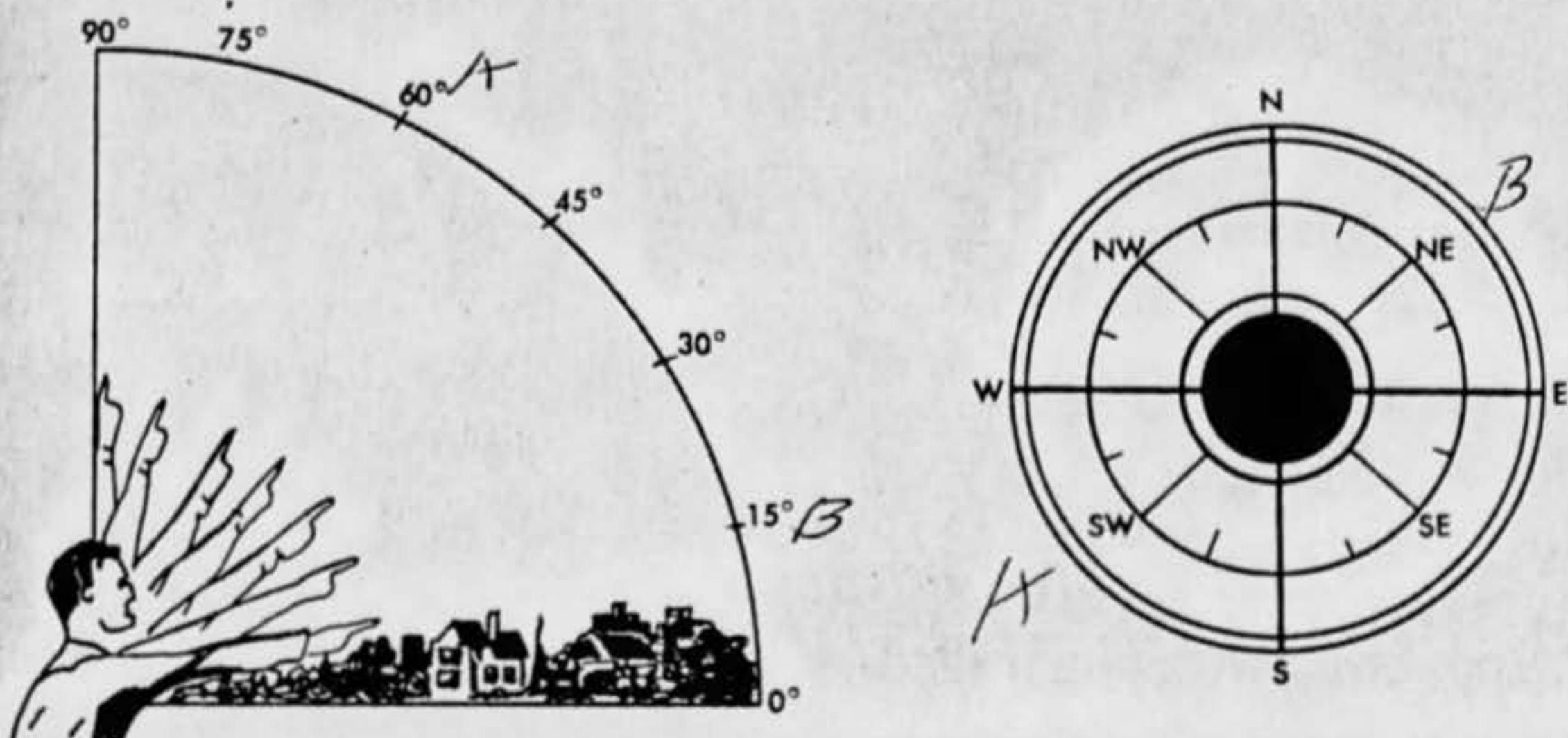
19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.



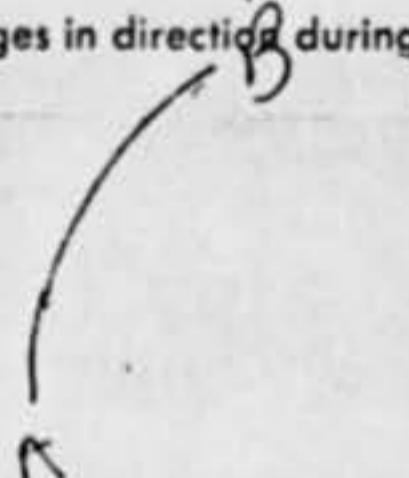
# Official U.S. Air Force

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27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it. Place an "A" on the compass when you first saw it. Place a "B" on the compass when you last saw the object.

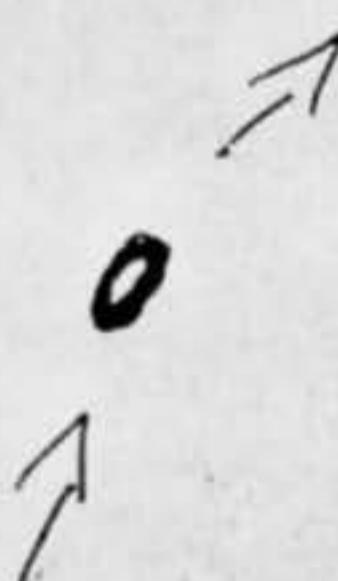


28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? \_\_\_\_\_

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.



# JFO form continued

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30. Have you ever seen this, or a similar object before. If so give date or dates and location.

No

31. Was anyone else with you at the time you saw the object? (Circle One)

31.1 IF you answered YES, did they see the object too? (Circle One)

Yes

No

Yes

No

31.2 Please list their names and addresses:

[REDACTED]  
Drive  
Iowa City, Iowa

32. Please give the following information about yourself:

NAME \_\_\_\_\_  
[REDACTED] Given Name \_\_\_\_\_ [REDACTED] Middle Name \_\_\_\_\_  
ADDRESS \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Zone \_\_\_\_\_ State \_\_\_\_\_  
[REDACTED] Street \_\_\_\_\_ City \_\_\_\_\_ Zone \_\_\_\_\_ State \_\_\_\_\_  
TELEPHONE NUMBER \_\_\_\_\_ AGE 12 SEX BOY

Indicate any additional information about yourself, including any special experience, which might be pertinent.

Go to Central Junior High

33. When and to whom did you report that you had seen the object?

12/4/08 December 08  
Day Month Year

[REDACTED]  
My Science Teacher

DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)  
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433



REPLY TO  
ATTN OF:

TDPT (UFO)

8 JAN 1969

SUBJECT: UFO Observation, 14 Dec 1968

TO:

Iowa City, Iowa 52240

Reference your recent unidentified flying object sighting which you reported to the Air Force. The information which we have received is not sufficient for a scientific investigation. Request you complete the attached AF Form 117 and return it in the self-addressed envelope. Thank you for reporting your observation to the Air Force.

*H*  
HECTOR QUINTANILLA, Jr, Lt Colonel, USAF  
Chief, Aerial Phenomena Office  
Aerospace Technologies Division  
Production Directorate

1 Atch  
AF Form 117 w/envelope

# JFO form continued

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# Official U.S. Air Force I

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34. Date you completed this questionnaire:

12/15/68 December 1968

Day

Month

Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

Iowa City  
52240

Postmark illegible

Dear Major,

I saw a undentify flying object Saturday Dec. 14 1968 at 6:00. I have a questionare at home that comes out at by the Air Force. If you want me to send you this questionare I would be happy to. Would you please send me back a letter if you want me to send it to you or do you want me to send it to the police?

Your friend,

DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)  
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433



REPLY TO:  
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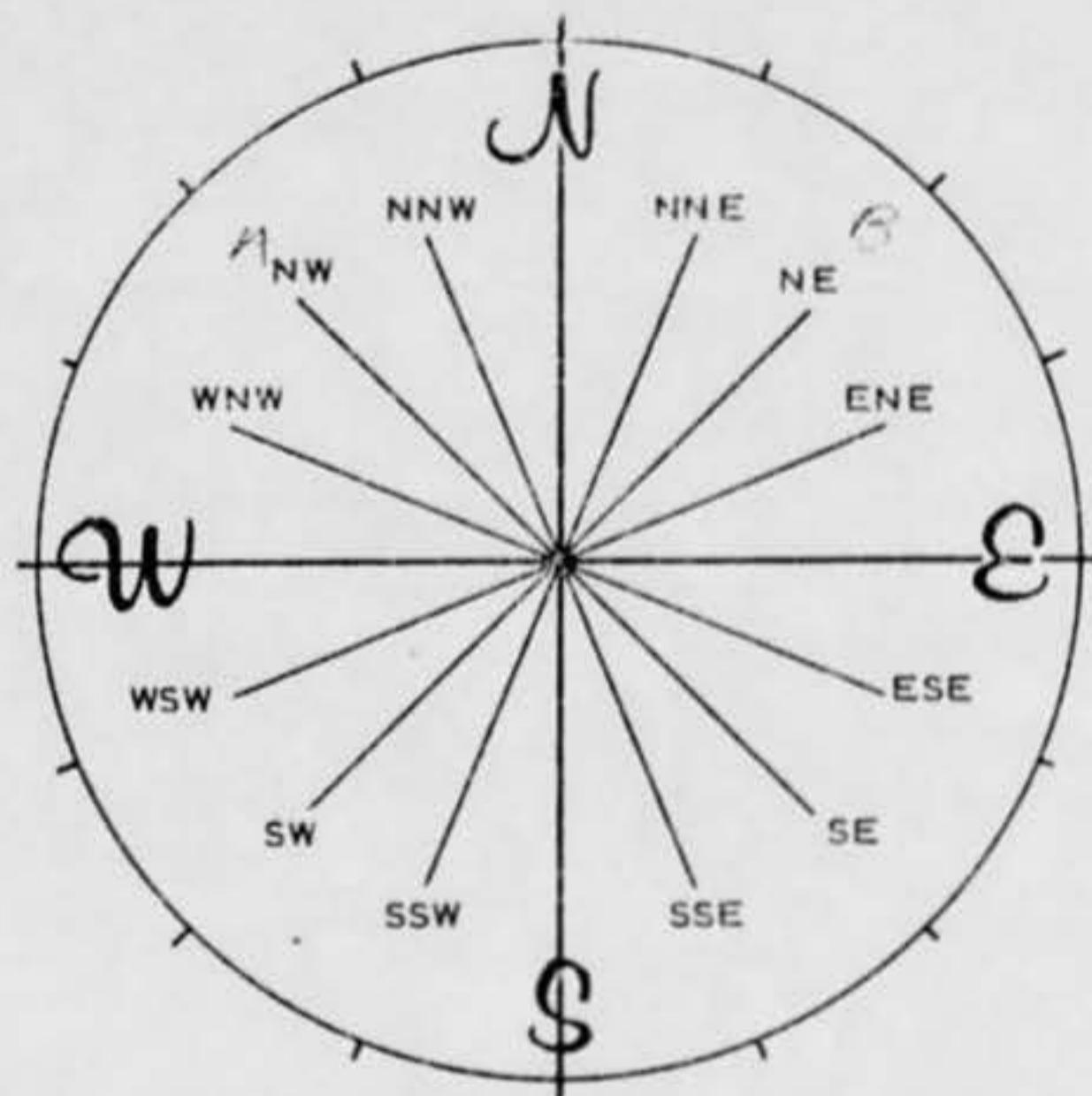
[REDACTED]  
Drive  
Iowa City, Iowa 52240

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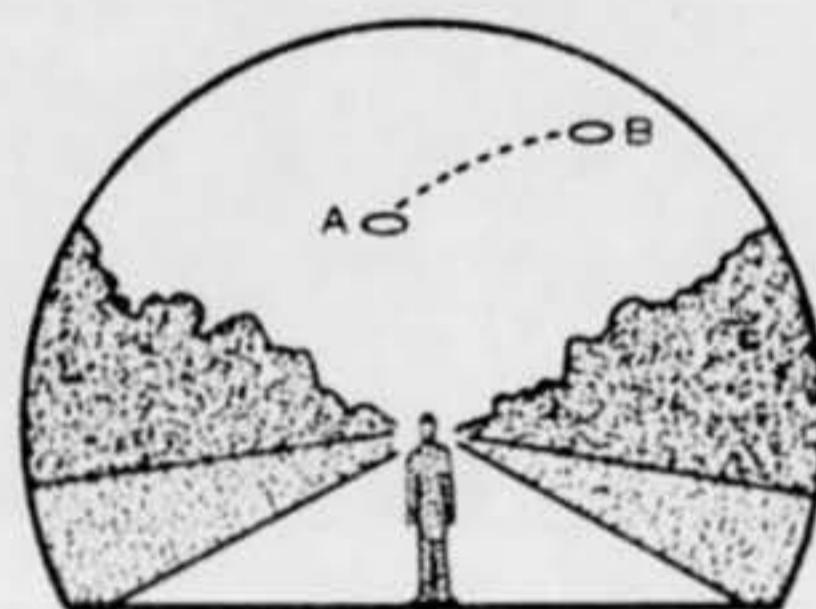
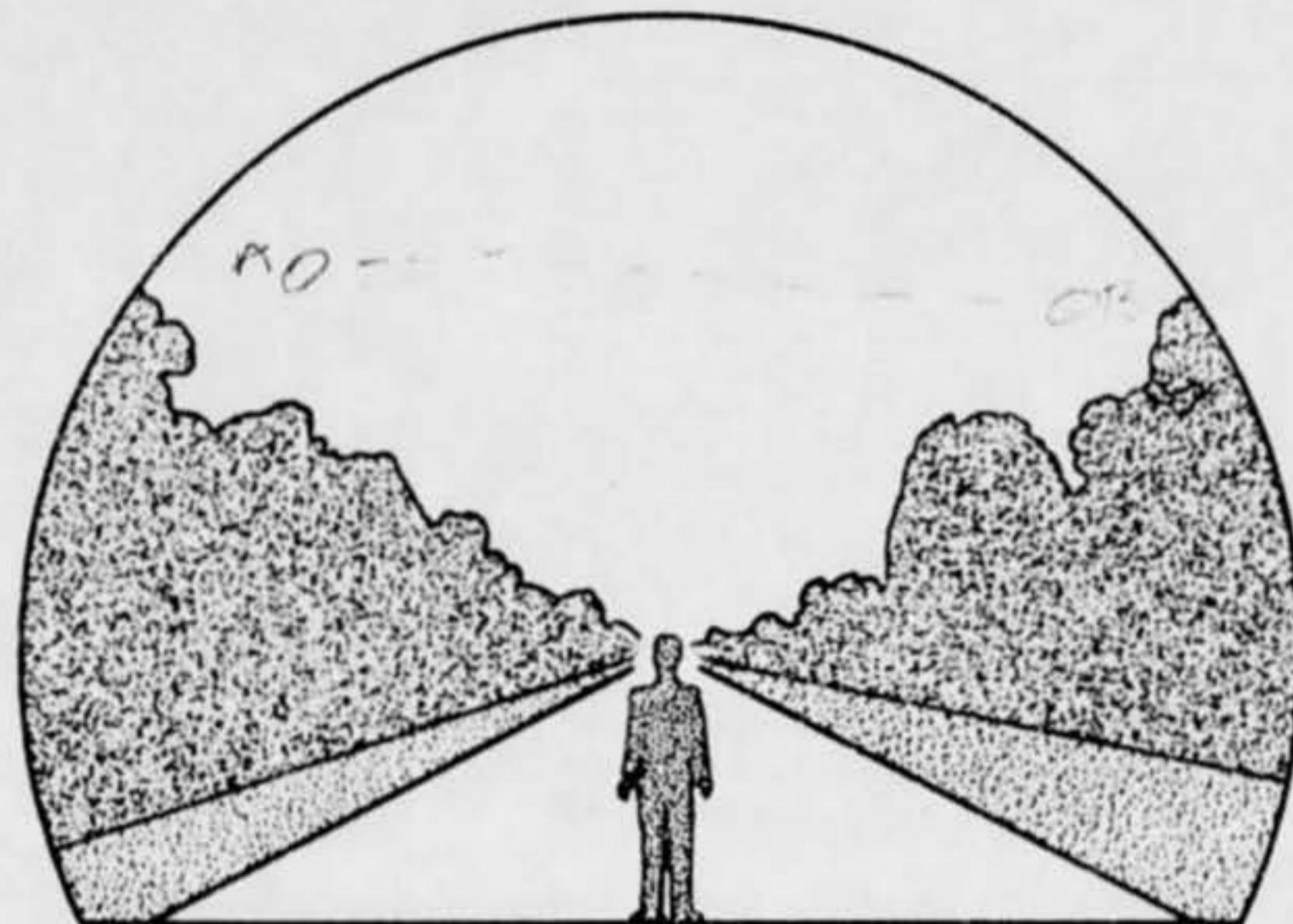
*Hector Quintanilla Jr.*  
HECTOR QUINTANILLA, Jr., Lt Colonel, USAF  
Chief, Aerial Phenomena Office  
Aerospace Technologies Division  
Production Directorate

1 Atch  
AF Form 117 w/envelope

6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



7. IN THE SKETCH BELOW, PLACE AN "A" AT THE POSITION OF THE PHENOMENON WHEN FIRST SEEN, AND A "B" AT THE POSITION OF THE PHENOMENON WHEN LAST SEEN. CONNECT THE "A" AND "B" WITH A LINE TO APPROXIMATE THE MOVEMENT OF THE PHENOMENON BETWEEN "A" AND "B". THAT IS, SCHEMATICALLY SHOW WHETHER THE MOVEMENT APPEARED TO BE STRAIGHT, CURVED OR ZIG-ZAG. REFER TO SMALLER SKETCH AS AN EXAMPLE OF HOW TO COMPLETE THE LARGER SKETCH.



## SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL  
NUMBER 21-R258

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES. YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, IAW AFR 80-17. (IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)

1. WHEN DID YOU SEE THE PHENOMENON?

DAY 12/11/68 MONTH 12 YEAR 1968

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON?

HOUR 8 MINUTES 00  A.M.  P.M.

3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON?

HOUR 8 MINUTES 10  A.M.  P.M.

4. TIME ZONE

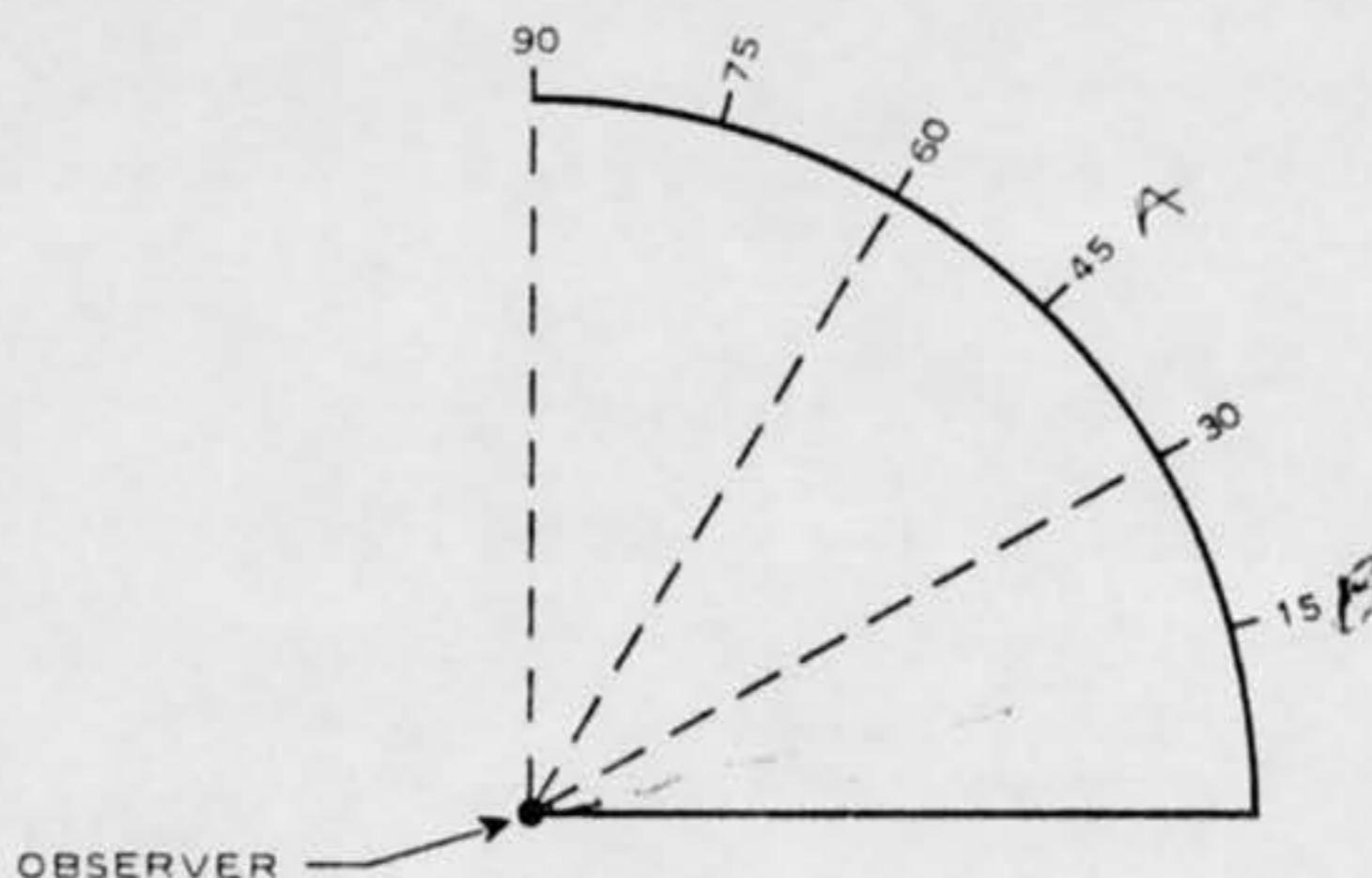
 DAYLIGHT SAVINGS STANDARD EASTERN CENTRAL MOUNTAIN PACIFIC OTHER

5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.

Albion



6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.



10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

11. CONDITIONS (Check appropriate blocks.)

A.	SKY	B.	WEATHER
	DAY	CUMULUS CLOUDS ( <i>Low fluffy</i> )	FOG OR MIST
	TWILIGHT	CIRRUS CLOUDS ( <i>High fleecy or Herring-bone</i> )	HEAVY RAIN
<input checked="" type="checkbox"/>	NIGHT		LIGHT RAIN OR DRIZZLE
<input checked="" type="checkbox"/>	CLEAR	NIMBUS CLOUDS ( <i>Rain</i> )	HAIL
	PARTLY CLOUDY	CUMULONIMBUS CLOUDS ( <i>Thunderstorms</i> )	SNOW OR SLEET
	COMPLETELY OVERCAST		UNKNOWN
		HAZE OR SMOG	<input checked="" type="checkbox"/> NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1)	STARS	(2)	MOON
	NONE	BRIGHT MOONLIGHT	NO MOONLIGHT
	A FEW	MOON WITH HALO	<input checked="" type="checkbox"/> UNKNOWN
<input checked="" type="checkbox"/>	MANY	MOON HIDDEN BY CLOUDS	
	UNKNOWN	PARTIAL ( <i>New or quarter</i> )	

D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE?  YES  NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

IN FRONT OF YOU		TO YOUR RIGHT	OVERHEAD ( <i>Near noon</i> )
IN BACK OF YOU		TO YOUR LEFT	UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

half block from street light

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.

white 

## 8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? (Check appropriate blocks.)

<input checked="" type="checkbox"/> OUTDOORS			IN BUSINESS SECTION OF CITY
<input type="checkbox"/> IN BUILDING		IN RESIDENTIAL SECTION OF CITY	
IN CAR	<input type="checkbox"/> AS DRIVER	<input type="checkbox"/> AS PASSENGER	IN OPEN COUNTRYSIDE
IN BOAT			NEAR AIRFIELD
IN AIRPLANE	<input type="checkbox"/> AS PILOT	<input type="checkbox"/> AS PASSENGER	FLYING OVER CITY
OTHER		FLYING OVER OPEN COUNTRY	
		OTHER	

## A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:

WHAT DIRECTION WERE YOU MOVING?		HOW FAST WERE YOU MOVING?
NORTH	EAST	
SOUTH	WEST	
NORTHEAST	SOUTHEAST	
NORTHWEST	SOUTHWEST	DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON?
		<input type="checkbox"/> YES <input type="checkbox"/> NO

EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6.

They didn't

DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVESED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.

HOW MUCH OTHER TRAFFIC WAS THERE?

None

DID YOU NOTICE ANY AIRPLANES?  YES     NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.

## 9. HOW LONG WAS THE PHENOMENON IN SIGHT?

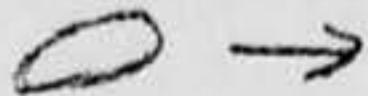
LENGTH OF TIME	CERTAIN OF TIME	NOT VERY SURE
10 minutes	<input checked="" type="checkbox"/> FAIRLY CERTAIN	JUST A GUESS

HOW WAS TIME DETERMINED?

clock

WAS THE PHENOMENON IN SIGHT CONTINUOUSLY?  YES     NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.

15. DRAW A PICTURE THAT WILL SHOW THE SHAPE OF THE PHENOMENON. INCLUDE AND LABEL ANY DETAILS THAT MIGHT HAVE APPEARED AS WINGS OR PROTRUSIONS, AND INDICATE EXHAUST OR VAPOR TRAILS. INDICATE BY AN ARROW THE DIRECTION THE PHENOMENON WAS MOVING.



16. WHAT WAS THE ANGULAR SIZE? HOLD A MATCH AT ARM'S LENGTH IN FRONT OF A KNOWN OBJECT, SUCH AS A STREET LAMP OR THE MOON. NOTE HOW MUCH OF THE OBJECT IS COVERED BY THE HEAD OF THE MATCH. NOW IF YOU HAD BEEN ABLE TO PERFORM THIS EXPERIMENT AT THE TIME OF THE SIGHTING, ESTIMATE WHAT FRACTION OF THE PHENOMENON WOULD HAVE BEEN COVERED BY THE MATCH HEAD.

Don't know